

**STATE OF COLORADO**  
**Department of State**

1700 Broadway, Suite 270  
Denver, CO 80290



**Gigi Dennis**  
**Secretary of State**

**Holly Lowder**  
**Director, Elections**

**Attn: Lucile Nichols**  
**County Clerk and Recorder**

**COUNTY: CROWLEY**

Pursuant to Section 1-7-514 C.R.S. and Election Rule 11, the following election devices have been selected for Random Audit for the 2006 Primary Election.. Please follow the instructions in Rule 11 to determine the method for conducting the post-election audit. Additional help is available on our web site, or you can contact John Gardner at (303) 860-6971 for additional information.

The following table lists the EQUIPMENT that has been randomly selected for auditing:

<u>Make/Model</u>	<u>Type</u>	<u>Use:</u>	<u>Serial #</u>	<u>Race Name to Audit:</u>	<u>Machine Count:</u>	<u>Manual/Hand Count:</u>	<u>Canvass Board</u> <u>Initials</u>
eSlate	DRE	Poll Place	A0B233	Rep. County Sheriff - Clark	52	52	MK, RG, AM, SRT
eSlate	DRE	Poll Place	A0B233	Rep. County Assessor - Davis	57	57	MK, RG, AM, SRT
eScan	Scanner	Central Count	G7866D	Dem. Attorney General - O'Brien	2	2	MK, RG, AM, SRT
eScan	Scanner	Central Count	G7866D	Dem. State Representative Dist 63 - Artery	1	1	MK, RG, AM, SRT

**NOTE: If the RACES selected were not counted on that device or do not appear in the central count ballot selection, the Canvass board shall audit "Republican for State Treasurer" or "Democrat for Attorney General" in place of the missing races. Please mark the form appropriately. If the MACHINES selected were not used in the election, please contact JOHN GARDNER (303) 860-6971 as soon as possible.**

**Please complete the highlighted fields in the attached table and fax, or e-mail the form back to the Secretary of State at: [voting.systems@sos.state.co.us](mailto:voting.systems@sos.state.co.us). This form must be returned no later than: 5:00pm August 21, 2006.**

<b>For Internal Use Only</b>	E-mailed by (name): _____	Faxed by (name): _____
	Email Date and Time: _____	Faxed Date and Time: _____
	Email Address: _____	Fax Number: _____
Phone Number: _____	(Attach copy of E-mail)	(Attach copy of fax confirmation)